

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA		FEC IDENTIFICATION NUMBER ▼ C C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 4400 North Point Parkway Suite 190		Amount 50137.09	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 001
Purpose of Expenditure direct mail postage		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 13 / 2015
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 4400 North Point Parkway Suite 190		Amount 45223.79	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 002
Purpose of Expenditure direct mail production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 13 / 2015
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	95360.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

MM / DD / YYYY
11 / 18 / 2015

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA		FEC IDENTIFICATION NUMBER ▼ C C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 4400 North Point Parkway Suite 190		Amount 34614.65	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 003
Purpose of Expenditure direct mail postage	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 13 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		13057071.34	

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 4400 North Point Parkway Suite 190		Amount 30733.60	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 004
Purpose of Expenditure direct mail production	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 13 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		13087804.94	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	65348.25
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

MM / DD / YYYY
11 / 18 / 2015

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 3 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA		FEC IDENTIFICATION NUMBER ▼ C C00571372																									
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
M	M																										
D	D																										
Y	Y	Y	Y	Y	Y																						

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>11</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>17</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M		11			D	D		17			Y	Y	Y	Y	Y	Y						
M	M																										
11																											
D	D																										
17																											
Y	Y	Y	Y	Y	Y																						
Mailing Address 4400 North Point Parkway Suite 190		Amount <table border="1" style="width:100%"> <tr><td>20590.34</td></tr> </table>		20590.34																							
20590.34																											
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 005 Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>11</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>13</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>	M	M		11			D	D		13			Y	Y	Y	Y	Y	Y						
M	M																										
11																											
D	D																										
13																											
Y	Y	Y	Y	Y	Y																						
Purpose of Expenditure direct mail postage		Category/Type 004																									
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>																								
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"> <tr><td>5954120.08</td></tr> </table>	5954120.08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____																							
5954120.08																											

Full Name of Payee The Stoneridge Group, LLC		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>11</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>17</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M		11			D	D		17			Y	Y	Y	Y	Y	Y						
M	M																										
11																											
D	D																										
17																											
Y	Y	Y	Y	Y	Y																						
Mailing Address 4400 North Point Parkway Suite 190		Amount <table border="1" style="width:100%"> <tr><td>19976.02</td></tr> </table>		19976.02																							
19976.02																											
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 006 Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>11</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>13</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>	M	M		11			D	D		13			Y	Y	Y	Y	Y	Y						
M	M																										
11																											
D	D																										
13																											
Y	Y	Y	Y	Y	Y																						
Purpose of Expenditure direct mail production		Category/Type 004																									
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>																								
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"> <tr><td>5974096.10</td></tr> </table>	5974096.10	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____																							
5974096.10																											

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<table border="1" style="width:100%"> <tr><td>40566.36</td></tr> </table>	40566.36
40566.36		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<table border="1" style="width:100%"> <tr><td></td></tr> </table>	
(c) TOTAL Independent Expenditures..... ▶	<table border="1" style="width:100%"> <tr><td>201275.49</td></tr> </table>	201275.49
201275.49		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

M	M	
11		

D	D	
18		

Y	Y	Y	Y	Y	Y

Signature